

S/N 09/827,266

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: James G. Skakoon et al.

Examiner:

Serial No.: 09/827,266

Group Art Unit: 3737

Filed: April 5, 2001

Docket: 723.041US1

Title: MEDICAL DEVICE INTRODUCER

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Assistant Commissioner for Patents
Washington, D.C. 20231

In compliance with the duty imposed by 37 C.F.R. § 1.56, and in accordance with 37 C.F.R. §§ 1.97 *et. seq.*, the enclosed materials are brought to the attention of the Examiner for consideration in connection with the above-identified patent application. Applicants respectfully request that this Information Disclosure Statement be entered and the documents listed on the attached Form 1449 be considered by the Examiner and made of record. Pursuant to the provisions of MPEP 609, Applicants further request that a copy of the 1449 form, initialed by the Examiner to indicate that all listed citations have been considered, be returned with the next official communication.

Under 37 C.F.R. §1.97(b)(3), it is believed that no fee or certificate is required with this Information Disclosure Statement. However, if an Office Action on the merits has been mailed, the Commissioner is hereby authorized to charge any additional fees or credit any overpayment to Account No. 19-0743.

The Examiner is invited to contact the Applicants' Representative at the below-listed telephone number if there are any questions regarding this communication.

Respectfully submitted,

JAMES G. SKAKOON ET AL.

By their Representatives,

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Date 1-25-02

By

David C. Peterson
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CERTIFICATE UNDER 37 CFR 1.8: The undersigned hereby certifies that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to: Commissioner of Patents, Washington, D.C. 20231, on this 28 day of January, 2002.

Name

Gina M. Uphus

Signature

Gina Uphus



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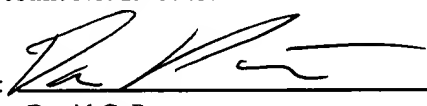
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We are transmitting herewith the following attached items (as indicated with an "X"):

- ☒ A return postcard.
☒ A Supplemental Information Disclosure Statement (1 pg.), Form 1449 (1 pg.), and copies of ⁶ cited references.


Please consider this a **PETITION FOR EXTENSION OF TIME** for sufficient number of months to enter these papers and please charge any additional required fees or credit overpayment to Deposit Account No. 19-0743.

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